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CONFIRMATION NO. 2555

SERIAL NUMBER 09/938,688	FILING DATE 08/24/2001 RULE	CLASS 379	GROUP ART UNIT 2643	ATTORNEY DOCKET NO. D2647	
APPLICANTS Jeffrey D. Ollis, Harleysville, PA;					
** CONTINUING DATA ***** NONE					
** FOREIGN APPLICATIONS ***** NONE					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/28/2001					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature: [Signature] Initials: [Initials]		STATE OR COUNTRY PA	SHEETS DRAWING 2	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
ADDRESS 27774					
TITLE Internet protocol telephony dial server					
FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 2555

SERIAL NUMBER 09/938,688	FILING DATE 08/24/2001 RULE	CLASS 370	GROUP ART UNIT 2665	ATTORNEY DOCKET NO. D2647	
APPLICANTS Jeffrey D. Ollis, Harleysville, PA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/28/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY PA	SHEETS DRAWING 2	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
ADDRESS 27774 MAYER, FORTKORT & WILLIAMS, PC 251 NORTH AVENUE WEST 2ND FLOOR WESTFIELD, NJ 07090					
TITLE Internet protocol telephony dial server					
FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		